APPLICATION FOR RECORDS RETENTION SCHEDULE

GEORGIA DEPARTMENT OF HUMAN RESOURCES
OFFICE OF ADMINISTRATIVE SERVICES
RECORDS MANAGEMENT UNIT

- -	npleting this form contact DHR Records Management Unit, 56-4976 GIST: 221-4983	47 Trinity Avenue, Atlanta, Georgia
DHR	1. GEORGIA DEPARTMENT OF HUMAN RESOURCES	ARCHIVES AND HISTORY
Application Date December 4, 1981	Division of Mental Health & Mental Retardation Evaluation, Statistics and Planning Unit	Application Number
Application Number DHR 81-15	47 Trinity Avenue, S.W. Atlanta, Georgia 30334	Date Received Data Completed DEC 1 1 1981 DEC 2 1 1981
2. Person to Contact	Working Title	Telaphone Number
1	l, Ph.D Chief, Evaluation, Statistics an	
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4. Dates of Series	6. Records Series Title (followed by title used in office; if different,	
Earliant Locast 6/79 continuin	Mental Health/Mental Retardation Facili	ity Plan Files
doig abuse, and me Retardation instit The Division sets technical assistant and evaluates the The Doubleation, St alcohol and drug a output information		State mental health and Mental 4 area mental health centers. te funds, provides training and and early intervention projects, d evaluates mental health, lans, and produces computerized
Documents relating to: Four	This file contains the following documents linclude form numbers and in general plans submitted annually by 34 community centers.	s, 10 institutions, 8 consortia,
· 1	the drug abuse plan for Metro Atlanta, and evaluation	
ment of major social & econdicts for each primary disable tion of physical facilities insues: preadmission screen two well discussion of advisor revenue; planning object towar A 26 item Planning Of Mediges are prioritized towards a put in priority only the items arranged:	Name, facility or consortium number, geographic ibing planning, value assumptions, mission statement omic facts which affect the plan. A NETDS ASSESSMENT ility-age-group-service modality class & a brief description of existing programsing, continuity of care, alternatives to hospitalizationy council activities and facility support; financiatives (which are linked to continuation & improved but be bjective Form is completed for each objective and appointment of the 4 years. Consortium plan objective according to the Consortium. Plan includes state Board of Health and Health System Agentuder, numerically by facility or consortium number.	table containing estimated usuat need cription of high usuat needs; a description, & % of minority group patients at analysis of service costs and source dget requests and distribution of state plies to only one budget function. es are drawn directly from facility ments by advisory council, lead County nodes that the plan has been reviewed.
Trackly Reference Rate 2. 200 to six months old 2. 200 position months and older	How often are records referred: which are: 5: Seven to twelve months old 2.0; Thirteen to to 10.	wenty-four months old 1.5;
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	x	c. is this a vital record?					
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	ж	e. When one or two documents in the file make it necessary to keep the entire file for a long period, could these documents be echeduled apparately?					
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	х	/g. Is the information contained in this series ever analyzed and/or recorded in a summarized report? If yes, attach copy.					
	x	h. Is there a duplication of this series in your office, or in another office or agency? If you, where?					
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				Elizabeth W. Crank, CRM - RMO State Records Committee (Signature)	Date		
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